



Teacher Request for Summer School Classes or Continuing Education Classes



Name of Teacher: _____

School: _____

***** This request must be submitted to the Office of Education for approval if you are expecting any financial assistance from the Gulf States Conference (as allowed by policy).**

Purpose for taking these classes: To pursue a Master's Program in Education
 To meet certification renewal requirements

Classes you plan to take: _____

Dates you plan on taking the classes: _____

Where do you plan to take these classes from: Southern Adventist University
 SAU Online
 Other

If other, please specify where you plan to take these courses from: _____

Policy:

- **Master's Programs in Education (FTE Teachers Only):**
 - All Master's programs in Education should be taken through Southern Adventist University. The Gulf States Conference will cover up to two Master's level courses in Education per year.
 - If your Master's program in Education is not available at Southern Adventist University, the Gulf States Conference will cover the equivalent cost of two Master's level courses in Education per year at Southern Adventist University.

- **Certification Renewal Requirements (FTE Teachers Only):**
 - All Certification Renewal Courses should be taken through Southern Adventist University. The Gulf States Conference will cover up to two courses per year (you are encouraged to take these during the summer).
 - If your renewal courses are not available at Southern Adventist University, the Gulf States Conference will typically cover the cost of up to two courses at another university with pre-approval to do so.

***** If you wish to take more courses per year than is approved, you may apply to use your Professional Development Funds to help pay for your summer classes. If you would like to have the cost of additional classes taken out of your payroll, please let us know.**

***** If you are a locally hired teacher and wish to work on your certification, please contact the Conference Office of Education to discuss options.**

Sign: _____

Date: _____

Conference Office of Education (circle one)	Approved	Denied	Modified (see letter)
Date	_____ Superintendent's Signature		